

7/16  
6-12-01

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		20	5/5
FORMALITY REVIEW	Sm	70964	6/11/01
RESPONSE FORMALITY REVIEW	Zm	927	09/14/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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5/16/01  
 HSA  
 06/14/01